

OCCURRENCE DATE(S)		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011261		STN# 07		PRIMAR YES																
ON OR BETWEEN																														
MM/DD/YY 08/03/2015		MM/DD/YY 08/03/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011261		BURGLAR FORCE NO F. YES NO		NO. OF UNITS ENT.																
TIME 00:12		DAY OF WEEK MON		TIME 00:16		DAY OF WEEK MON		ADDRESS / LOCATION OF INCIDENT 635 HARKLE DRIVE				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO <input checked="" type="checkbox"/>		HATE / BIAS MOT. CODE										
OFFENSE	OFFENSE / INCIDENT				STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING					
	1 CONTRIBUT DELINQUENCY OF MINOR				30-6-3		F		C				NO		YES		YES				25				NO		NO		NO	
	2 FALSE IMPRISONMENT				30-4-3		F		C				NO		YES		YES				25				NO		NO		NO	
	3 ENTICEMENT OF A CHILD				30-9-1		M		C				NO		YES		YES				25				NO		NO		NO	
PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON H-INTERVIEWED V-VICTIM C-CITED S-SUSPECT A-ARRESTED W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY O-OTHER TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST. P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB O-OTHER U-UNKNOWN INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH U-UNCONSCIOUSNESS N-NONE ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN A-AMERICAN INDIAN/NATIVE AMERICAN A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE W-WHITE O-OTHER U-UNKNOWN																														
PERO N CODE R		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) MENCHACA MERLINDA																								
STREET ADDRESS 32 PERLA LANE										APT. NO.		CITY PENA BLANCA										CTY.		STATE NM		ZIP 87041				
RES. PHONE (505) 239-2366					BUS. PHONE					SOCIAL SECURITY NO.					DOB					AGE		SEX F		RACE WHT BLK ASIA IND UNK						
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.						
PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																								
STREET ADDRESS										APT. NO.		CITY										CTY.		STATE		ZIP				
RES. PHONE					BUS. PHONE					SOCIAL SECURITY NO.					DOB					AGE		SEX		RACE WHT BLK ASIA IND UNK						
HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.						
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER				VALUE		DRUG VALUE								
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN						DATE RECOVERED		N.I.C. NO.										
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM				MAKE / BRAND				MODEL				CALIBER				VALUE		DRUG VALUE								
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)						SERIAL / OAN						DATE RECOVERED		N.I.C. NO.										
YEAR 2011		MAKE FORD				MODEL				BODY STYLE				LICENSE NO. 879RNK				LIC. YEAR 2020		LIC. ST. NM		TOP COLOR MAR		BTM. COLOR MAR						
VALUE / DAMAGE EST.																														
ON THE ABOVE DATE, I WAS CONTACTED BY SANTA FE RECC TO RESPOND TO THE ABOVE LOCATION IN REFERENCE TO A YOUNG FEMALE JUVENILE THAT WAS TAKEN FROM THE LOCATION, BY FORCE BY A 34YOA MALE DRIVING A RED SPORT UTILITY TYPE OF VEHICLE.																														
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."				COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X				DATE 08/03/2015																	
	REPORTING OFFICER (PRINT) ANAYA, ISAIAH				RANK PO I		I.D. NO. 5773		DATE 08/03/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO				I.D. NO.		DATE 08/03/2015													
	ASSISTING OFFICER (PRINT)				RANK		I.D. NO.		DATE		PROCESSED BY				DATE		DATA ENTRY PERSON		DATE											
	APPROVING OFFICER (PRINT)				RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CL.A. C.L.E. <input checked="" type="checkbox"/>				EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY F-NOT APPLICABLE				DATE 08/03/2015									
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.) DA,INV										CASES CLEARED BY THIS ARREST CASE NO.				CASE NO.				CASE NO.											

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011167		STN# 04		PRIMAR YES																																												
ON OR BETWEEN																																																												
MM/DD/YY 08/01/2015		MM/DD/YY		MM/DD/YY 08/01/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011167		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																																												
TIME 00:40		DAY OF WEEK SAT		TIME 00:40		DAY OF WEEK SAT		ADDRESS / LOCATION OF INCIDENT 5020 PROMENADE BLVD				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO <input type="checkbox"/> <input checked="" type="checkbox"/>		HATE / BIAS MOT. CODE																																								
OFFENSE	OFFENSE / INCIDENT					STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING		ALCOH. DRUG		COMP.																														
	1 CON SUB VIOLATION OF SCH 1,2,3					30-31-23D		F		C		35A		NO		NO		NO		P		21				NO		UNK		NO																														
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED V-VICTIM C-CITED S-SUSPECT A-ARRESTED W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY O-OTHER																														TYPE CODES I-INDIVIDUAL B-BUSINESS F-FINANCIAL INST. P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB O-OTHER U-UNKNOWN										INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH U-UNCONSCIOUSNESS N-NONE										ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE W-WHITE O-OTHER U-UNKNOWN									
	PERO N CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) RICHARD N 3RD																																																					
	STREET ADDRESS 528 INDIANA STREET SE AP										APT. NO. C		CITY ALBUQUERQUE										CTY. 02		STATE NM		ZIP 87108-0000																																	
	RES. PHONE (505) 322-1888										BUS. PHONE										SOCIAL SECURITY NO.					DOB					AGE		SEX M		RACE WHT BLK ASIA IND UNK																									
	HEIGHT 5' 09"		WEIGHT 185 LBS		HAIR BRO		EYES GRN		ETHNIC		AGG. ASSAULT JUST. HOM. CODE					VICTIM OF OFF. NO.					VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.																													
	PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																																																					
	STREET ADDRESS										APT. NO.		CITY										CTY.		STATE		ZIP																																	
	RES. PHONE										BUS. PHONE										SOCIAL SECURITY NO.					DOB					AGE		SEX		RACE WHT BLK ASIA IND UNK																									
	HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE					VICTIM OF OFF. NO.					VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.																													
	PROPERTY STATUS 5		PROPERTY TYPE 10		TYPE OF ITEM CLEAR BAGGIE W/ BLA					MAKE / BRAND					MODEL					CALIBER					VALUE					DRUG VALUE																														
	SUSPECTED DRUG TYPE D		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) BLACK TAR SUBSTANCE IN BAGGIE										SERIAL / OAN					DATE RECOVERED					N.I.C. NO.																																	
	PROPERTY STATUS 5		PROPERTY TYPE 10		TYPE OF ITEM PILLS					MAKE / BRAND					MODEL					CALIBER					VALUE					DRUG VALUE																														
	SUSPECTED DRUG TYPE P		QUANTITY 2		UNIT OF MS. OZ		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.) ORANGE CIRCULAR PILLS IMPRINT "14A"										SERIAL / OAN					DATE RECOVERED					N.I.C. NO.																																	
	YEAR		MAKE					MODEL					BODY STYLE					LICENSE NO.					LIC. YEAR		LIC. ST.		TOP COLOR					BTM. COLOR																												
	VALUE / DAMAGE EST.																																																											
SYNOPSIS	RICHARD DIAZ WAS ARRESTED AT 5020 PROMENADE BLVD, MCDONALDS, ON AN OUTSTANDING MUNICIPAL COURT WARRANT. A SEARCH INCIDENT TO HIS ARREST YIELDED HEROIN, 2 SYRINGES, ONE OF WHICH WAS LOADED WITH A LIQUID SUBSTANCE AND OTHER DRUG PARAPHERNALIA.																																																											
CERT./STATUS	"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."										YES <input type="checkbox"/> NO <input type="checkbox"/>		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."										COMPLAINANT / VICTIM CERTIFICATION SIGNATURE X										DATE																											
	REPORTING OFFICER (PRINT) GONZALES, JOSE										RANK SGT.		I.D. NO. 5667		DATE 08/01/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO										I.D. NO.		DATE																															
	ASSISTING OFFICER (PRINT)										RANK		I.D. NO.		DATE		PROCESSED BY					DATE					DATA ENTRY PERSON					DATE																												
	APPROVING OFFICER (PRINT)										RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE <input type="checkbox"/> INACT. <input type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> CLA. <input checked="" type="checkbox"/> CLE. <input type="checkbox"/>										EXCEPT CODE		A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE NO CUSTODY H-NOT APPLICABLE										DATE																					
	AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.) DA										CASES CLEARED BY THIS ARREST CASE NO.										CASE NO.										CASE NO.																													

OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-011097		STN# 06		PRIMAR YES																
ON OR BETWEEN																																
MM/DD/YY 07/31/2015		MM/DD/YY 07/31/2015		MM/DD/YY 07/31/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-011097		BURGLAR FORCE NO F. YES NO		NO. OF UNITS ENT.																
TIME 07:30		DAY OF WEEK FRID		TIME 07:30		DAY OF WEEK FRID		ADDRESS / LOCATION OF INCIDENT CHAMISA ST MICHAELS DR				CITY SANTA FE		CTY. 01		ZIP 87505		GANG REL. YES NO		HATE / BIAS MOT. CODE												
OFFENSE	OFFENSE / INCIDENT					STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING						
	1 WARRANT SERVICE					SFPD-03		F		C		90Z		NO		NO						18				NO		NO		NO		
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)	PERSON CODES		V-VICTIM		W-WITNESS		O-OTHER		TYPE CODES		P-POLICE		O-OTHER		INJURY CODES		ETHNIC CODES		A-ASIAN/ORIENTAL		W-WHITE											
	G-PARENT/GUARDIAN		C-CITED		D-DECEASED				I-INDIVIDUAL		G-GOVERNMENT		U-UNKNOWN		B-APPARENT BROKEN BONE		B-BLACK		A-ASIAN/ORIENTAL		W-WHITE											
	R-REPORTING PERSON		S-SUSPECT		M-MISSING PERSON/				B-BUSINESS		R-RELIGIOUS				M-APPARENT MINOR INJURY		H-HISPANIC/MEXICAN		C-CHINESE		O-OTHER											
	INTERVIEWED		A-ARRESTED		RUNAWAY				F-FINANCIAL INST.		S-SOCIETY/PUB				U-UNCONSCIOUSNESS		J-JAPANESE		J-JAPANESE		U-UNKNOWN											
	PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																									
	A		I		N		HOLMES																									
							NICHOLE																									
							STREET ADDRESS		APT. NO.		CITY						CTY.		STATE		ZIP											
							19 GUNBARREL RD				ESPANOLA						17		NM		87532											
							RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE													
									(505) 351-4335								F		WHT BLK ASIA IND UNK													
							HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.	
							5' 01"		115 LBS		BRO		BRO																			
							PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																			
												STREET ADDRESS		APT. NO.		CITY						CTY.		STATE		ZIP						

ON		OR		BETWEEN		DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 13-010164		STN# 04		PRIMAR YES									
MM/DD/YY 08/01/2015		MM/DD/YY 08/01/2015		MM/DD/YY 08/01/2015		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 13-010164		BURGLAR FORCE NO F. YES NO		NO. OF UNITS ENT.											
TIME 00:40		DAY OF WEEK SAT		TIME 00:40		DAY OF WEEK SAT		ADDRESS / LOCATION OF INCIDENT 5020 PROMANADE BLVD				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO YES NO		HATE / BIAS MOT. CODE							
OFFENSE / INCIDENT		STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING					
		1		WARRANT SERVICE		SFPD-03		M		C		90Z		NO		NO		NO		21		NO		UNK		NO	
SUBJECTS (VICTIMS / SUSPECTS / PERSONS / BUSINESSES)		PERSON CODES G-PARENT/GUARDIAN R-REPORTING PERSON H-INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED		W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY		O-OTHER		TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB		O-OTHER U-UNKNOWN		INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH		U-UNCONSCIOUSNESS N-NONE		ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE U-UNKNOWN		W-WHITE O-OTHER U-UNKNOWN	
		PERO N CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) DIAZ		RICHARD		N		3RD													
		STREET ADDRESS 528 INDIANA STREET SE AP		APT. NO. C		CITY ALBUQUERQUE		CTY. 02		STATE NM		ZIP 87108-0000															
		RES. PHONE (505) 322-1888		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX M		RACE WHT BLK ASIA IND UNK													
		HEIGHT 5' 09"		WEIGHT 185 LBS		HAIR BRO		EYES GRN		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.	
		PERO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																			
		STREET ADDRESS		APT. NO.		CITY		CTY.		STATE		ZIP															
		RES. PHONE		BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE WHT BLK ASIA IND UNK													
		HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.		VICTIM OF SUSP. NO		REL.	
		PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE											
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.															
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE													
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.															
YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR											
VALUE / DAMAGE EST.																											
CERT./STATUS		"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE		X		DATE															
		REPORTING OFFICER (PRINT) GONZALES, JOSE		RANK SGT.		I.D. NO. 5667		DATE 08/01/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO		I.D. NO.		DATE													
		ASSISTING OFFICER (PRINT)		RANK		I.D. NO.		DATE		PROCESSED BY		DATE		DATA ENTRY PERSON		DATE											
		APPROVING OFFICER (PRINT)		RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CLA. G																	



OCCURRENCE DATE(S)				DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET				ORI NO. NM0260100		INCIDENT NO. 15-009309		STN# 01		PRIMAR YES																							
ON		OR		BETWEEN		AGENCY SANTA FE PD				GEOGR. CODE 01075		CASE NUMBER 15-009309		BURGLAR FORCE NO F.		NO. OF UNITS ENT.																							
MM/DD/YY 08/01/2015		MM/DD/YY 08/01/2015		MM/DD/YY 08/01/2015		ADDRESS / LOCATION OF INCIDENT 3000 CERRILLOS ROAD				CITY SANTA FE		CTY. 01		ZIP 87507		GANG REL. YES NO		HATE / BIAS MOT. CODE 00																					
TIME 23:04		DAY OF WEEK SAT		TIME 23:04		DAY OF WEEK SAT		OFFENSE / INCIDENT				STATUTE OR ORDINANCE		FEL/ MISD.		ATTEMPTED/ COMPLETED		UCR OFFENSE CODE		DOM. VIOL.		SEX CRIME?		CHILD		CRIMINAL ACTIVITY CODE		LOCAT. CODE		WEAPON CODE UP TO 3 PER OFFENSE		OFFENDER(S) SUSPECTED OF USING							
								1 WARRANT SERVICE				SFPD-03		M		C		90Z		NO		NO		NO				18		01				NO		UNK		NO	

OCCURRENCE DATE(S)		DATE REPORTED		<b>SANTA FE POLICE DEPARTMENT HOT SHEET</b>				ORI NO. <b>NM0260100</b>		INCIDENT NO. <b>15-011148</b>		STN# <b>05</b>		PRIMAR <b>YES</b>			
ON OR BETWEEN																	
MM/DD/YY <b>07/31/2015</b>		MM/DD/YY <b>07/31/2015</b>		AGENCY <b>SANTA FE PD</b>				GEOGR. CODE <b>01075</b>		CASE NUMBER <b>15-011148</b>		BURGLAR FORCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		NO. OF UNITS ENT.			
TIME <b>18:00</b>		DAY OF WEEK <b>FRID</b>		TIME <b>18:29</b>		DAY OF WEEK <b>FRID</b>		ADDRESS / LOCATION OF INCIDENT <b>CAMINO DE JACOBO OPEN SPACE</b>				CITY <b>SANTA FE</b>		CTY. <b>01</b>		ZIP <b>87505</b>	
												GANG REL. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HATE / BIAS MOT. CODE			

  

OFFENSE	OFFENSE / INCIDENT			STATUTE OR ORDINANCE	FEL/ MISD.	ATTEMPTED/ COMPLETED	UCR OFFENSE CODE	DOM. VIOL.	SEX CRIME?	CHILD	CRIMINAL ACTIVITY CODE	LOCAT. CODE	WEAPON CODE UP TO 3 PER OFFENSE	OFFENDER(S) SUSPECTED OF USING			
	1													ALCOH.	DRUG	COMP.	
	<b>WARRANT SERVICE</b>			<b>SFPD-03</b>	<b>F</b>	<b>C</b>	<b>90Z</b>	<b>NO</b>	<b>NO</b>	<b>NO</b>		<b>10</b>			<b>UNK</b>	<b>UNK</b>	<b>NO</b>

  

PERSON CODES P-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED		V-VICTIM C-CITED S-SUSPECT A-ARRESTED	W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY	O-OTHER	TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.	P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB	O-OTHER U-UNKNOWN	INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION				M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH	U-UNCONSCIOUSNESS N-NONE	ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN A-AMERICAN INDIAN/NATIVE AMERICAN	A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE	W-WHITE O-OTHER U-UNKNOWN
PERO N CODE <b>A</b>	TYPE CODE <b>I</b>	INJURY CODE <b>N</b>	1-NAME (LAST, FIRST, MIDDLE, SUFFIX) <b>LUCIANO MENDOZA</b>													
STREET ADDRESS <b>804 ALARID</b>				APT. NO.		CITY <b>SANTA FE</b>				CTY. <b>01</b>		STATE <b>NM</b>		ZIP <b>87505</b>		
RES. PHONE			BUS. PHONE			SOCIAL SECURITY NO.			DOB		AGE		SEX <b>M</b>		RACE WHT BLK ASIA IND UNK	
HEIGHT <b>5' 09"</b>	WEIGHT <b>165 LBS</b>	HAIR <b>BRO</b>	EYES <b>BRO</b>	ETHNIC	AGG. ASSAULT JUST. HCM. CODE	VICTIM OF OFF. NO.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	
PERO N CODE	TYPE CODE	INJURY CODE	1-NAME (LAST, FIRST, MIDDLE, SUFFIX)													
STREET ADDRESS				APT. NO.		CITY				CTY.		STATE		ZIP		
RES. PHONE			BUS. PHONE			SOCIAL SECURITY NO.			DOB		AGE		SEX		RACE WHT BLK ASIA IND UNK	
HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	AGG. ASSAULT JUST. HCM. CODE	VICTIM OF OFF. NO.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	
PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM			MAKE / BRAND			MODEL			CALIBER		VALUE		DRUG VALUE	
SUSPECTED DRUG TYPE	QUANTITY	UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)					SERIAL / OAN			DATE RECOVERED		N.I.C. NO.			
PROPERTY STATUS	PROPERTY TYPE	TYPE OF ITEM			MAKE / BRAND			MODEL			CALIBER		VALUE		DRUG VALUE	
SUSPECTED DRUG TYPE	QUANTITY	UNIT OF MS.	DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)					SERIAL / OAN			DATE RECOVERED		N.I.C. NO.			
YEAR	MAKE			MODEL			BODY STYLE			LICENSE NO.		LIC. YEAR	LIC. ST.	TOP COLOR	BTM. COLOR	
VALUE / DAMAGE EST.																

  

ON ABOVE DATE AND TIME OFFICERS WERE DISPATCHED TO THE CAMINO DE JACOBO OPEN SPACE IN REGARDS TO VAGRANTS. UPON ARRIVAL I MADE CONTACT WITH MR. MENDOZA WHO WAS AT A CAMP WITHIN A TENT. HE WAS RUN THROUGH NCIC AND RETURNED WITH FIRST JUDICIAL DISTRICT COURT WARRANT D0101CR201500250 FOR FAILURE TO APPEAR. THE WARRANT WAS SIGNED BY JUDGE MARLOWE SOMMER AND CARRIED A BOND OF \$10,000.00 CASH ONLY. MR. MENDOZA WAS NOT RESPONSIBLE FOR ANY DEPENDENTS AT THE TIME OF HIS ARREST. HE WAS PROVIDED A COPY OF THE WARRANT AT ADC.															
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"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES <input type="checkbox"/> NO <input type="checkbox"/>	"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINTANT / VICTIM CERTIFICATION SIGNATURE <b>X</b>		DATE					
REPORTING OFFICER (PRINT) <b>DEBACA, JOHN</b>			RANK <b>POIII</b>	I.D. NO. <b>6680</b>	DATE <b>07/31/2015</b>	DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO			I.D. NO.	DATE		
ASSISTING OFFICER (PRINT)			RANK	I.D. NO.	DATE	PROCESSED BY		DATE	DATA ENTRY PERSON		DATE	
APPROVING OFFICER (PRINT)			RANK	I.D. NO.	DATE	INCIDENT STATUS ACTIVE <input type="checkbox"/> INACT. <input type="checkbox"/> CLOSED <input type="checkbox"/> U.F. <input type="checkbox"/> CL.A. <input checked="" type="checkbox"/> CL.E. <input type="checkbox"/>		EXCEPT CODE	A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DENIED D-VICTIM REF.TO COOPERATE E-JUVENILE NO CUSTODY N-NOT APPLICABLE			DATE
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)						CASES CLEARED BY THIS ARREST		CASE NO.		CASE NO.		

OCCURRENCE DATE(S)						DATE REPORTED		SANTA FE POLICE DEPARTMENT HOT SHEET							ORI NO. NM0260100		INCIDENT NO. 14-017417		STN# 08		PRIMAR YES									
ON OR BETWEEN																														
MM/DD/YYYY			MM/DD/YYYY			MM/DD/YYYY			AGENCY SANTA FE PD									GEOGR. CODE 01075		CASE NUMBER 14-017417		BURGLAR FORCE NO. F.		NO. OF UNITS ENT.						
TIME		DAY OF WEEK		TIME		DAY OF WEEK		TIME		DAY OF WEEK		ADDRESS / LOCATION OF INCIDENT 600 N. GUADALUPE									CITY SANTA FE		CTY. 01		ZIP 87501		GANG REL. YES NO		HATE / BIAS MOT. CODE	
20:47		SAT		20:47		SAT																								
OFFENSE		OFFENSE / INCIDENT										STATUTE OR ORDINANCE		FEL/ MISD.	ATTEMPTED/ COMPLETED	UCR OFFENSE CODE	DOM. VIOL.	SEX CRIME?	CHILD	CRIMINAL ACTIVITY CODE	LOCAT. CODE	WEAPON CODE UP TO 3 PER OFFENSE	OFFENDER(S) SUSPECTED OF USING							
		WARRANT SERVICE										SFPD-03		M	C	90Z	NO	NO	NO		12			UNK	UNK	NO				
SUBJECTS / BUSINESSSES		PERSON CODES O-PARENT/GUARDIAN R-REPORTING PERSON I-INTERVIEWED										V-VICTIM C-CITED S-SUSPECT A-ARRESTED	W-WITNESS D-DECEASED M-MISSING PERSON/ RUNAWAY	O-OTHER	TYPE CODES H-INDIVIDUAL B-BUSINESS F-FINANCIAL INST.		P-POLICE G-GOVERNMENT R-RELIGIOUS S-SOCIETY/PUB	O-OTHER U-UNKNOWN	INJURY CODES B-APPARENT BROKEN BONE I-POSSIBLE INTERNAL INJURY L-SEVERE LACERATION		M-APPARENT MINOR INJURY O-OTHER MAJOR INJURY T-LOSS OF TEETH	U-UNCONSCIOUSNESS N-NONE	ETHNIC CODES B-BLACK H-HISPANIC/MEXICAN J-JAPANESE A-AMERICAN INDIAN/NATIVE AMERICAN		A-ASIAN/ORIENTAL C-CHINESE J-JAPANESE U-UNKNOWN	I-INDIAN O-OTHER U-UNKNOWN				
		PERSO N CODE A		TYPE CODE I		INJURY CODE N		1-NAME (LAST, FIRST, MIDDLE, SUFFIX) LAUREN HERRERA																						
		STREET ADDRESS 539 1/2 JUANITA ST										APT. NO.		CITY SANTA FE										CTY. 01		STATE NM		ZIP 87501		
		RES. PHONE (505) 983-1873										BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX F		RACE WHT BLK ASIA IND UNK								
		HEIGHT 5' 02"		WEIGHT 115 LBS		HAIR BRO		EYES BRO		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.				
SUBJECTS / SUSPECTS / BUSINESSES		PERSO N CODE		TYPE CODE		INJURY CODE		1-NAME (LAST, FIRST, MIDDLE, SUFFIX)																						
		STREET ADDRESS										APT. NO.		CITY										CTY.		STATE		ZIP		
		RES. PHONE										BUS. PHONE		SOCIAL SECURITY NO.		DOB		AGE		SEX		RACE WHT BLK ASIA IND UNK								
		HEIGHT		WEIGHT		HAIR		EYES		ETHNIC		AGG. ASSAULT JUST. HOM. CODE		VICTIM OF OFF. NO.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.		VICTIM OF SUSP. NO.		REL.				
		PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE														
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																		
PROPERTY STATUS		PROPERTY TYPE		TYPE OF ITEM		MAKE / BRAND		MODEL		CALIBER		VALUE		DRUG VALUE																
SUSPECTED DRUG TYPE		QUANTITY		UNIT OF MS.		DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)		SERIAL / OAN		DATE RECOVERED		N.I.C. NO.																		
YEAR		MAKE		MODEL		BODY STYLE		LICENSE NO.		LIC. YEAR		LIC. ST.		TOP COLOR		BTM. COLOR														
VALUE / DAMAGE EST.																														
SYNOPSIS		ON 8/1/2015, LAUREN HERRERA WAS ARRESTED ON AN OUTSTANDING SANTA FE MAGISTRATE COURT WARRANT # M-49-MR-2014-02699, SIGNED BY JUDGE DONITA SENA. BOND SET AT \$200.00 CASH OR CASHIER CHECK. LAUREN WAS TRANSPORTED AND BOOKED INTO THE SANTA FE ADULT JAIL. AT THE TIME OF HER ARREST, SHE HAD NO DEPENDANTS.																												
CERT./STATUS		"I WILL PROSECUTE/TESTIFY SHOULD THE OFFENDER BE ARRESTED."		YES NO		"I UNDERSTAND IT IS A CRIMINAL OFFENSE TO FILE A FALSE REPORT TO POLICE."		COMPLAINANT / VICTIM CERTIFICATION SIGNATURE		X		DATE																		
		REPORTING OFFICER (PRINT) GONZALES, JOSE		RANK SGT.		I.D. NO. 5667		DATE 08/01/2015		DETECTIVE/FOLLOW-UP OFFICER/ REFERRED TO		I.D. NO.		DATE																
		ASSISTING OFFICER (PRINT)		RANK		I.D. NO.		DATE		PROCESSED BY		DATE		DATA ENTRY PERSON		DATE														
		APPROVING OFFICER (PRINT)		RANK		I.D. NO.		DATE		INCIDENT STATUS ACTIVE INACT. CLOSED U.F. CLA. CL.E.		EXCEPT CODE		DECLINED C-EXTRADITION DENIED D-VICTIM REF. TO COOPERATE E-JUVENILE, NO CUSTODY N-NOT APPLICABLE		DATE														
		AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)								CASES CLEARED BY THIS ARREST CASE NO.		CASE NO.		CASE NO.																